

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

|              |             |             |
|--------------|-------------|-------------|
| SERIAL NO.   | 09 / 806269 | FILING DATE |
| APPLICANT(S) |             |             |

CLAIMS

|              | AS FILED   |      | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |            |
|--------------|------------|------|------------------------|------|------------------------|------------|
|              | IND.       | DEP. | IND.                   | DEP. | IND.                   | DEP.       |
| 1            |            |      | 1                      |      |                        |            |
| 2            |            |      | 1                      |      |                        |            |
| 3            |            |      | 1                      |      |                        |            |
| 4            |            |      | 1                      |      |                        |            |
| 5            |            |      | 1                      |      |                        |            |
| 6            |            |      | 1                      |      |                        |            |
| 7            |            |      | 1                      |      |                        |            |
| 8            |            |      | 1                      |      |                        |            |
| 9            |            |      | 1                      |      |                        |            |
| 10           |            |      | 1                      |      |                        |            |
| 11           |            |      | 1                      |      |                        |            |
| 12           |            |      | 1                      |      |                        |            |
| 13           |            |      | 1                      |      |                        |            |
| 14           |            |      |                        |      |                        |            |
| 15           |            |      |                        |      |                        |            |
| 16           |            |      |                        |      |                        |            |
| 17           |            |      |                        |      |                        |            |
| 18           |            |      |                        |      |                        |            |
| 19           |            |      |                        |      |                        |            |
| 20           |            |      |                        |      |                        |            |
| 21           |            |      |                        |      |                        |            |
| 22           |            |      |                        |      |                        |            |
| 23           |            |      |                        |      |                        |            |
| 24           |            |      |                        |      |                        |            |
| 25           |            |      |                        |      |                        |            |
| 26           |            |      |                        |      |                        |            |
| 27           |            |      |                        |      |                        |            |
| 28           |            |      |                        |      |                        |            |
| 29           |            |      |                        |      |                        |            |
| 30           |            |      |                        |      |                        |            |
| 31           |            |      |                        |      |                        |            |
| 32           |            |      |                        |      |                        |            |
| 33           |            |      |                        |      |                        |            |
| 34           |            |      |                        |      |                        |            |
| 35           |            |      |                        |      |                        |            |
| 36           |            |      |                        |      |                        |            |
| 37           |            |      |                        |      |                        |            |
| 38           |            |      |                        |      |                        |            |
| 39           |            |      |                        |      |                        |            |
| 40           |            |      |                        |      |                        |            |
| 41           |            |      |                        |      |                        |            |
| 42           |            |      |                        |      |                        |            |
| 43           |            |      |                        |      |                        |            |
| 44           |            |      |                        |      |                        |            |
| 45           |            |      |                        |      |                        |            |
| 46           |            |      |                        |      |                        |            |
| 47           |            |      |                        |      |                        |            |
| 48           |            |      |                        |      |                        |            |
| 49           |            |      |                        |      |                        |            |
| 50           |            |      |                        |      |                        |            |
| TOTAL IND.   |            | ↓    | 1                      | ↓    |                        | ↓          |
| TOTAL DEP.   | ↔          |      | 12                     | ↔    |                        | ↔          |
| TOTAL CLAIMS | [REDACTED] | 13   | [REDACTED]             |      | [REDACTED]             | [REDACTED] |

| *            | IND.       | DEP. | *          | IND. | DEP.       | * | IND.       | DEP. |
|--------------|------------|------|------------|------|------------|---|------------|------|
| 51           |            |      |            |      |            |   |            |      |
| 52           |            |      |            |      |            |   |            |      |
| 53           |            |      |            |      |            |   |            |      |
| 54           |            |      |            |      |            |   |            |      |
| 55           |            |      |            |      |            |   |            |      |
| 56           |            |      |            |      |            |   |            |      |
| 57           |            |      |            |      |            |   |            |      |
| 58           |            |      |            |      |            |   |            |      |
| 59           |            |      |            |      |            |   |            |      |
| 60           |            |      |            |      |            |   |            |      |
| 61           |            |      |            |      |            |   |            |      |
| 62           |            |      |            |      |            |   |            |      |
| 63           |            |      |            |      |            |   |            |      |
| 64           |            |      |            |      |            |   |            |      |
| 65           |            |      |            |      |            |   |            |      |
| 66           |            |      |            |      |            |   |            |      |
| 67           |            |      |            |      |            |   |            |      |
| 68           |            |      |            |      |            |   |            |      |
| 69           |            |      |            |      |            |   |            |      |
| 70           |            |      |            |      |            |   |            |      |
| 71           |            |      |            |      |            |   |            |      |
| 72           |            |      |            |      |            |   |            |      |
| 73           |            |      |            |      |            |   |            |      |
| 74           |            |      |            |      |            |   |            |      |
| 75           |            |      |            |      |            |   |            |      |
| 76           |            |      |            |      |            |   |            |      |
| 77           |            |      |            |      |            |   |            |      |
| 78           |            |      |            |      |            |   |            |      |
| 79           |            |      |            |      |            |   |            |      |
| 80           |            |      |            |      |            |   |            |      |
| 81           |            |      |            |      |            |   |            |      |
| 82           |            |      |            |      |            |   |            |      |
| 83           |            |      |            |      |            |   |            |      |
| 84           |            |      |            |      |            |   |            |      |
| 85           |            |      |            |      |            |   |            |      |
| 86           |            |      |            |      |            |   |            |      |
| 87           |            |      |            |      |            |   |            |      |
| 88           |            |      |            |      |            |   |            |      |
| 89           |            |      |            |      |            |   |            |      |
| 90           |            |      |            |      |            |   |            |      |
| 91           |            |      |            |      |            |   |            |      |
| 92           |            |      |            |      |            |   |            |      |
| 93           |            |      |            |      |            |   |            |      |
| 94           |            |      |            |      |            |   |            |      |
| 95           |            |      |            |      |            |   |            |      |
| 96           |            |      |            |      |            |   |            |      |
| 97           |            |      |            |      |            |   |            |      |
| 98           |            |      |            |      |            |   |            |      |
| 99           |            |      |            |      |            |   |            |      |
| 100          |            |      |            |      |            |   |            |      |
| TOTAL IND.   |            | ↓    |            |      |            |   |            |      |
| TOTAL DEP.   | ↔          |      |            | ↔    |            | ↔ |            | ↔    |
| TOTAL CLAIMS | [REDACTED] |      | [REDACTED] |      | [REDACTED] |   | [REDACTED] |      |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS